

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address		Douglas Aircraft Co. 190th & Normandie Torrance, CA 90502		A.State Manifest Document Number 84827698		
4. Generator's Phone (813 533-6677)		6. US EPA ID Number		B.State Generator's ID		
5. Transporter 1 Company Name		6. US EPA ID Number		C.State Transporter's ID		
J. C. Liquid Waste Disposal		C A D O 5 8 0 1 3 6 7		D.Transporter's Phone		
7. Transporter 2 Company Name		8. US EPA ID Number		E.State Transporter's ID		
9. Designated Facility Name and Site Address		10. US EPA ID Number		F.Transporter's Phone		
Triple J 3650 E. 26th St. Vernon, CA		C A T O 8 0 0 3 3 6 8		G.State Facility's ID		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. Hazardous Waste Liquid NOS ORM-E NA9189		001	TT	05000	G	221
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K.Handling Codes for Wastes Listed Above		
Alkaline Soap 5% Grease 2% Oil 3% Water 90%				01		
15. Special Handling Instructions and Additional Information						
Guide #31 Use gloves, goggles, respirator - Do not go near open flame or inhale fumes. If rejected at Triple J return to DAC.						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.						
Printed/Typed Name		Signature		Date		
Donald C. Gerber		sb		Month Day Year 08 10 86		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Date		
Printed/Typed Name		Signature		Date		
Adrian Arden S8303		Adrian Arden		Month Day Year 08 10 86		
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date		
Printed/Typed Name		Signature		Date		
19. Discrepancy Indication Space		Signature		Date		
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		Signature		Date		
Printed/Typed Name		Signature		Date		
ANNELINE OSTERBERG		AnneLine Osterberg		Month Day Year 08 10 86		

2-PP-11 STEAM SLAB

C6-700-86 JCI-0250  
21721-63837Department of Health Services  
Toxic Substances Control Division  
Sacramento, California

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5. Transporter 1 Company Name		7. Transporter 2 Company Name		C. State Transporter's ID		44151 ✓		
J. C. Liquid Waste Disposal		EAD06801367		D. Transporter's Phone		613 268-3137		
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's		613 268-3137		
9. Designated Facility Name and Site Address		10. US EPA ID Number		F. Transporter's Phone		G. State Facility's ID		
Triple J 3650 E. 26th St. Vernon, CA		CAT08003368		H. Facility's Phone				
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